PTO/SB/06 (08-03)

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on officerion of information unless it displays a variety of the control number.

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								10/025526			
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	FOR MANBER FILED MANBER EXTRA				RATE	FEE	l	RATE	FEE		
BASIC FEE (37 CFR 1.16(a))						•	OR				
TOTA	L CLAIMS		gricus 20 =			x s=		OR	x 8=		
INDE	FR 1.16(d) PENDENT CLAIM	<del>-  </del>				x s=		OR	x s=		
<u> </u>	(37 CFR 1.16(b)) minus 3 = 1							OR	+: •		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))						+ \$=					
. 11 (	he difference in co	turnn 1 is less than	zero, enter	"V" in column 2	<u>.</u>	TOTAL	لــــنا	OR	TOTAL _		
	CL	AIMS AS AME	NDED -	PARTII .						m.c. 1.	
8	900	(Column 1)		(Cotumn 2)	(Cotumn 3)	SMALL	ENTITY	OR	OTHER T		
<u>ر</u> ۲	700	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
TENT	Total ·	AMENDMENT	Minus	PAID FOR	E	x s =		OR	x s=	$\neg \tau$	
AMENDM	(37 OFR 1.16(d) Independent	.13	Minus	<u>~U</u>	<u> </u>	<u> </u>	<del>      .</del>	OR	x \$=		
) É	OF OFR 1.1600 4					X \$	1-1-	OR			
<u>₹</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.16(4))				TOTAL	<del>                                     </del>	"	TOTAL	+		
						ADO'L FEE	L	OR	ADDL FEE		
•		(Column 1)		(Calumn 2)	(Calumn 3)		<del></del>	7	T		
5	10/20/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOH TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	AMENUMENT	Minus	20	1.5	x s=		OR	x: <u>50</u> =	200	
FNOMENT	(07 CFR 1.14(cb)	· X	Minus	-4	= 1	X 8 =	1.	OR	x:200	200	
AMP	·		E 0000120	אומאא מינ	FR 1.16(d))	+5 =		OR	+ \$=		
۲	FIRST PRESENT	TATION OF MULTIPL	E UEPENUE	71 CO-CO (37 C		TOTAL ADOL FEE	1	OR	TOTAL ADO'L FEE	40	
1						AUULFEE	— <del></del> -				
L		(Column 1)	, ,	(Cotumn 2)	(Column 3)		1	7		ADOI-	
·	,	CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT	RATE	ADOI- TIONAL FEE		RATE	TIONAL FEE	
MENT	Total groffk 1.14(d)	-	Minus	=	F .	x 4		O,R	× 5=	<u> </u>	
			4	***	-	7			\	1	
2	Independent	1.	Minus	····.	1	× s	·	OR	X \$	<del> </del>	
NO STATE	Independent (37 GFR 1.1609)	ITATION OF MULTIP		<u> </u>	<u> </u>	× 5		OR	+ 5		

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 30, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to probess) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USPTO is probess, an application, confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, uspection of the USPTO. Time will vary depending upon the Individual case. Any comments including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.